#### APPLICATION DATA SHEET

**Application Information** 

Application Number:: (For supplemental sheets after initial filing)

Filing Date:: (For supplemental sheets after initial filing)

Application Type:: Divisional

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Title Line One:: HYDRAULIC FITTING

Title Line Two::

Attorney Docket Number:: PIP.00001/DVA

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure:: Figure 10

Total Drawing Sheets:: 6

Small Entity:: Yes

Petition Included?:: No

Secrecy Order in Parent Appl?:: No

**Applicant Information** 

Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full capacity

Given Name:: Marshall W. Wosik

Middle Name:: Walter

Family Name:: Marshall W. Wosik

Name Suffix::

City of Residence::

**Bloomfield Hills** 

State or Province

Michigan

of Residence::

Country of Residence:

USA

Street of mailing address::

3828 Top View Court

City of mailing address::

**Bloomfield Hills** 

State or Province of

Michigan

mailing address::

Country of mailing address::

USA

Postal or Zip Code of

mailing address:

48304

[IF THERE IS MORE THAN ONE APPLICANT/INVENTOR, REPEAT ABOVE FOR EACH]

**Correspondence Information** 

Correspondence Customer Number::

PIP.00001/DVA

Name::

Warn, Burgess & Hoffmann, P.C.

Street of mailing address::

P.O. Box 70098

City of mailing address::

Rochester Hills

State or Province of mailing

address::

MI

Country of mailing address::

USA

Postal or Zip Code of mailing

address::

48307

Phone number::

(248) 364-4300

Fax number::

(248) 364-4285

#### Representative Information

| Representative D signation:: | Registration Number:: | Representative Nam :: |
|------------------------------|-----------------------|-----------------------|
| Primary                      | 32775                 | Philip R. Warn        |
| Associat                     | 34985                 | John A. Miller        |
| Associate                    | 35365                 | Preston H. Smirman    |
| Associate                    | 33362                 | Joseph G. Burgess     |
| Associate                    | 33711                 | Richard W. Hoffmann   |
| Associate                    | 37167                 | Douglas P. LaLone     |
| Associate                    | 53425                 | Gregory L. Ozga       |

OR

| Representative Customer |  |
|-------------------------|--|
| Number::                |  |

# **Domestic Priority Information**

| Application:: | Continuity Type::           | Parent Application:: | Parent Filing Date:: |
|---------------|-----------------------------|----------------------|----------------------|
|               | Continuation of             | no more than 20      | 8 characters,        |
|               | Continuation-in-part of     | characters           | MM/DD/YY             |
|               | Division of                 |                      |                      |
|               | An application claiming the |                      |                      |
|               | benefit under 35 USC        |                      |                      |
|               | 119(e)                      |                      |                      |
|               | National Stage of           |                      |                      |
|               | Reissue of                  |                      |                      |
|               | Reexamination of            |                      |                      |
|               | Substitution for            |                      |                      |
| 09/595,792    | Divisional                  | Hydraulic Fitting    | 6/16/00              |

# Foreign Priority Applications

| Country::           | Application Number::                    | Filing Date::             | Priority Claimed:: |
|---------------------|---|---------------------------|--------------------|
| up to 50 characters | up to 20 characters<br>(See Appendix B) | 8 characters,<br>MM/DD/YY | Yes or No          |
| N/A                 |   |                           |                    |

### **Assignment Information**

Assignee name::

None